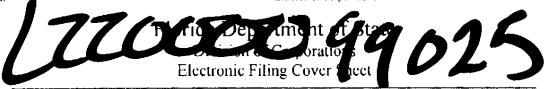
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Division of Corporations



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Division of Corporations

Fax Number : (850)617-6381

From:

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Account Number: FCA000000023 Phone : (954)208-0845 Fax Number : (614)573-3996

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:\_\_

# FLORIDA LIMITED LIABILITY CO.

## 904 NE 15th Ave LLC

Certificate of Status	Û
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

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Help

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE 1 - Name:

The name of the Limited Liability Company is:

904 NE 15th Ave LLC

(Must contain the words "Limited Liability Company, "L.L.C.," or "Ll.C.")

#### ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:
904 NE 15th Ave	125 Half Mile Road, Suite 207
Fort Lauderdale, FL 33304	Red Bank, NJ, 07701

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

C 1 Corporation Sys	stem	
· · · · · · · · · · · · · · · · · · ·	Name	
1200 South Pine Isla	and Road	
Florida street addres	65 (P.O. Box <u>NOT</u> acc	eptable)
Plantation	Florida	33324
City	State	Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

By:

Registered Agent's Signature (REQUIRED)

(CONTINUED)

FILED
2022 MAR 10 PM 2: 41
TALLAHASSEE FLORIDA

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
MGR	Anthony Grosso
-	904 NE 15th Ave., Fort Lauderdale, FL 33304
	***************************************
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